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## BIB DATA SHEET

CONFIRMATION NO. 8979

<b>SERIAL NUMBER</b> 10/598,002	<b>FILING or 371(c) DATE</b> 12/14/2006 <b>RULE</b>	<b>CLASS</b> 351	<b>GROUP ART UNIT</b> 2873	<b>ATTORNEY DOCKET NO.</b> COHA0104PUSA
<b>APPLICANTS</b> Bruce E. Cohan, Ann Arbor, MI; Andrew C. Pearch, Cumberland, OH; Zvi Flanders, Ann Arbor, MI; Donald E. Gillespie, Ann Arbor, MI;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/33250 10/20/2003 which claims benefit of 60/419,442 10/18/2002				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b> 10/18/2007				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /JAMES JONES/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MI	<b>SHEETS DRAWINGS</b> 11	<b>TOTAL CLAIMS</b> 27
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> BROOKS KUSHMAN P.C. 1000 TOWN CENTER TWENTY-SECOND FLOOR SOUTHFIELD, MI 48075 UNITED STATES				
<b>TITLE</b> Apparatus And Method For Self-Measurement Of Intraocular Pressure				
<b>FILING FEE RECEIVED</b> 390	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	